

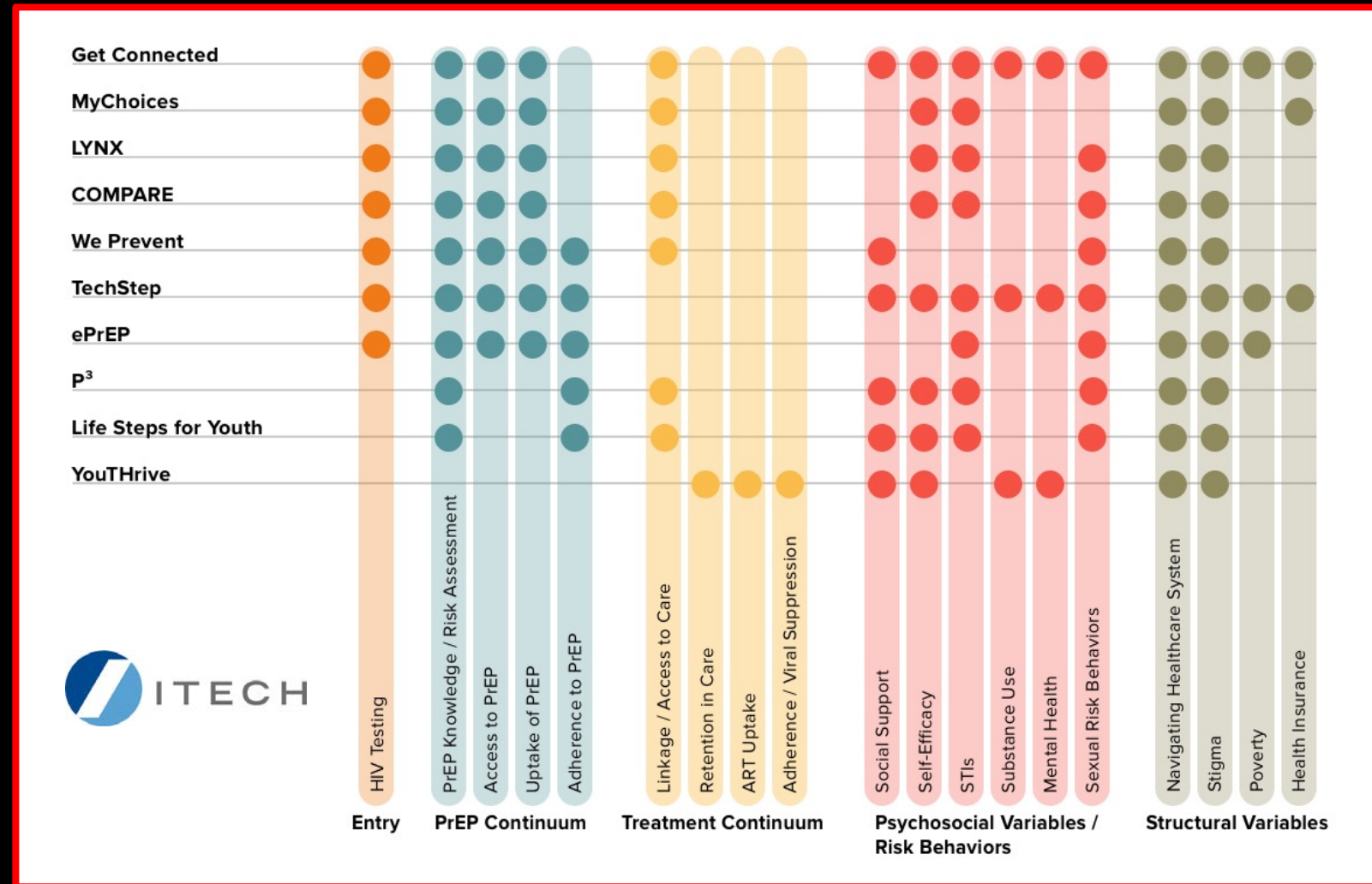
mHealth and Developmentally Tailored HIV/STI Prevention for YMSM

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Funding Disclosure



ADOLESCENT MEDICINE TRIALS NETWORK
FOR HIV/AIDS INTERVENTIONS

Funded through U19HD089881
(Sept 2016- May 2021)

Get Connected

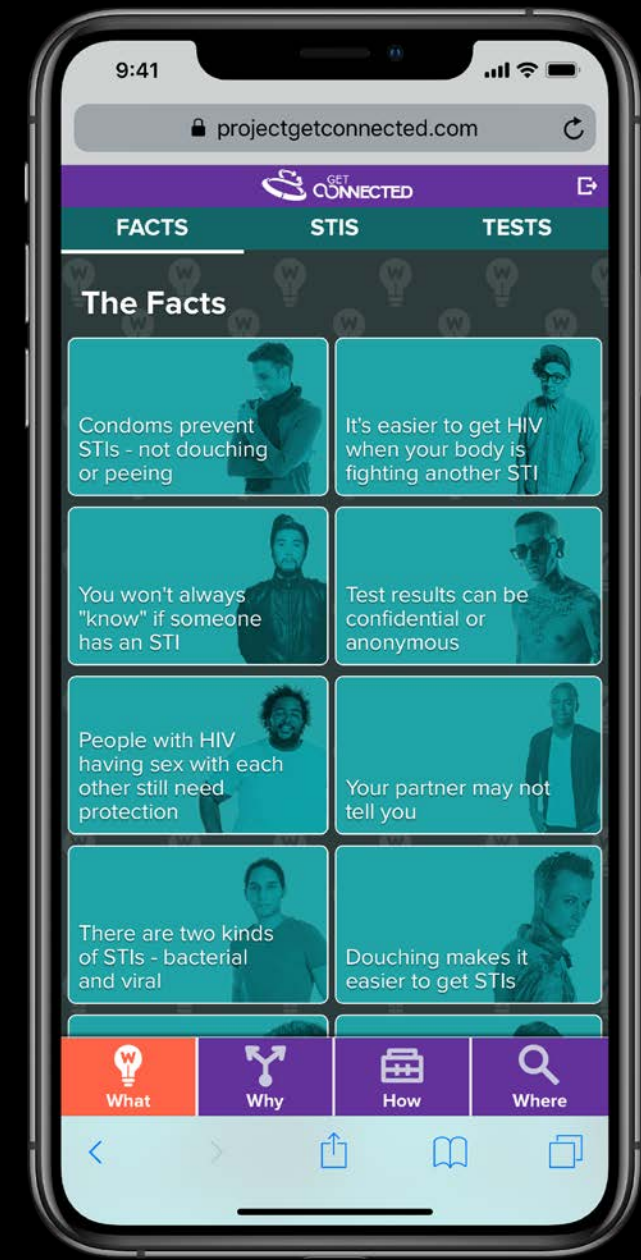
- Adaptation of the Project Connect Health Systems Intervention
 - Circumvent structural barriers affecting the reach and success of efforts geared towards HIV/STI prevention and care
- Developed through a CBPR approach and informed by mixed methods data from YMSM in Metro Detroit & Flint
 - Youth Advisory Board
 - Practitioner Advisory Board

Dittus PJ, De Rosa CJ, Jeffries RA, Afifi AA, Cumberland WG, Chung EQ, et al. (2014). The Project Connect Health Systems intervention: connecting sexually experienced youth to sexual and reproductive health care. *Journal of Adolescent Health*, 55(4), 528-534.

National Academies of Sciences and Medicine. The Promises and Perils of Digital Strategies in Achieving Health Equity. *Summary*. Washington, D.C. 2016.

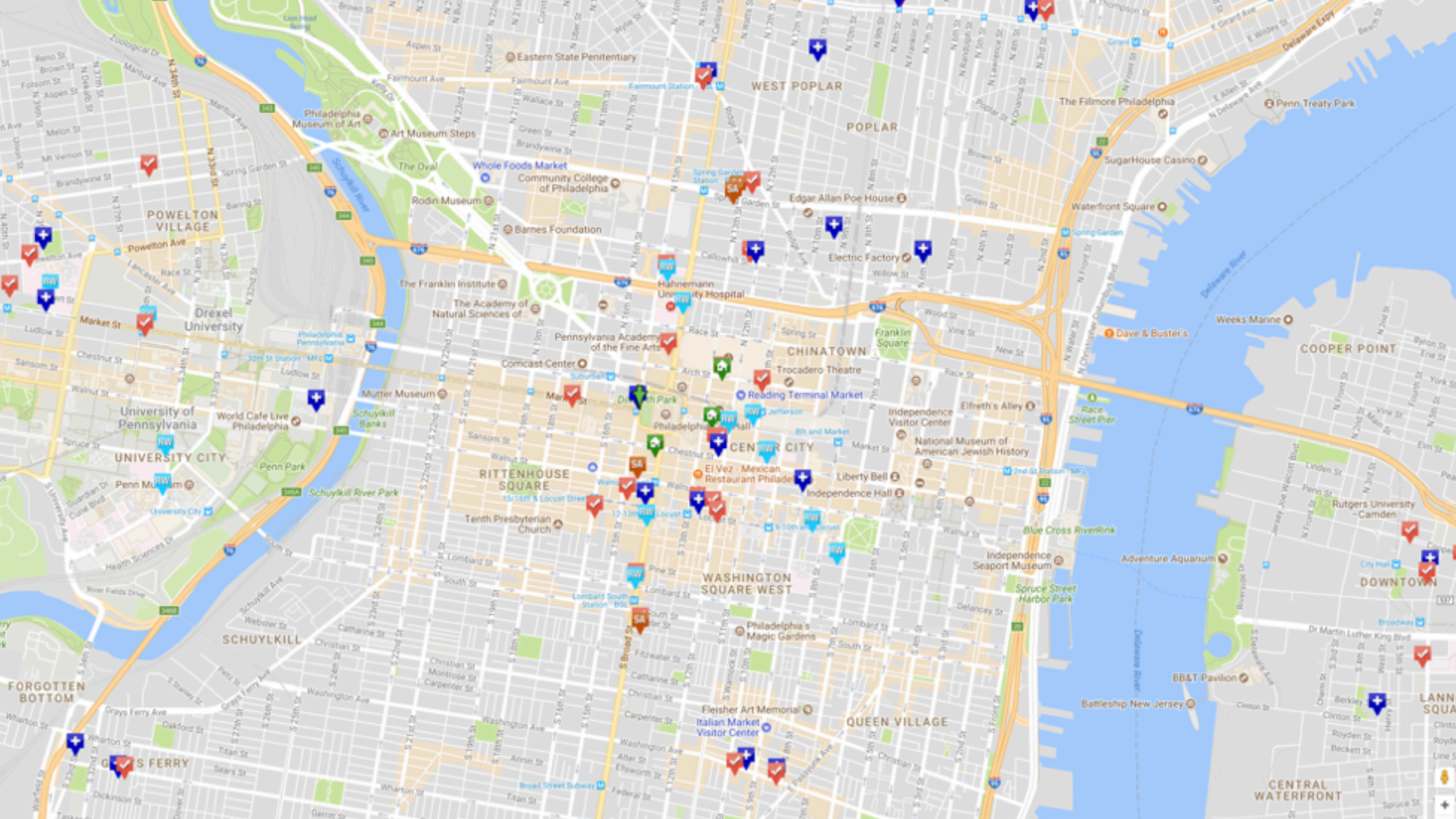
What is Get Connected?

- Get Connected (2.0) is a WebApp seeking to motivate HIV/STI testing and link young men to high-performing HIV/STI prevention and testing services.
- Content and images are *tailored* based on user characteristics.
 - Age
 - Race/ethnicity
 - Sexual identity
 - Relationship status
 - Core personal values
 - Structural struggles
 - Sources of support
 - HIV/STI testing history
 - Testing barriers/fears



Bauermeister, J.A., Pingel, E., Jadwin-Cakmak, L., Harper, G.W., Horvath, K., Weiss, G. & Dittus, P. (2015). Acceptability and preliminary efficacy of a tailored online HIV/STI testing intervention for young men who have sex with men: The Get Connected! Program. *AIDS & Behavior*, 19(10), 1860-1874.

Bauermeister, J.A., Golinkoff, J.M., Horvath, K.J., Hightow-Weidman, L., Sullivan, P., & Stephenson, R. (2018). Linking Young Men who have Sex with Men to Quality Care through a Multilevel Tailored Web App Intervention (Get Connected): Protocol for a Randomized Controlled Trial (ATN 139). *Journal of Medical Internet Research Protocols*, 7(8), e10444.



A map of Philadelphia, Pennsylvania, with various neighborhoods labeled such as University City, Center City, and University City. The map is overlaid with numerous red and blue icons, which represent HIV/STI testing sites. These icons are distributed across the city, with a higher concentration in the central urban areas. The Schuylkill River is visible on the left side of the map, and the Delaware River is on the right. Major highways like I-76 and I-95 are also shown.

Are all HIV/STI Sites Created Equally?



THINKING...

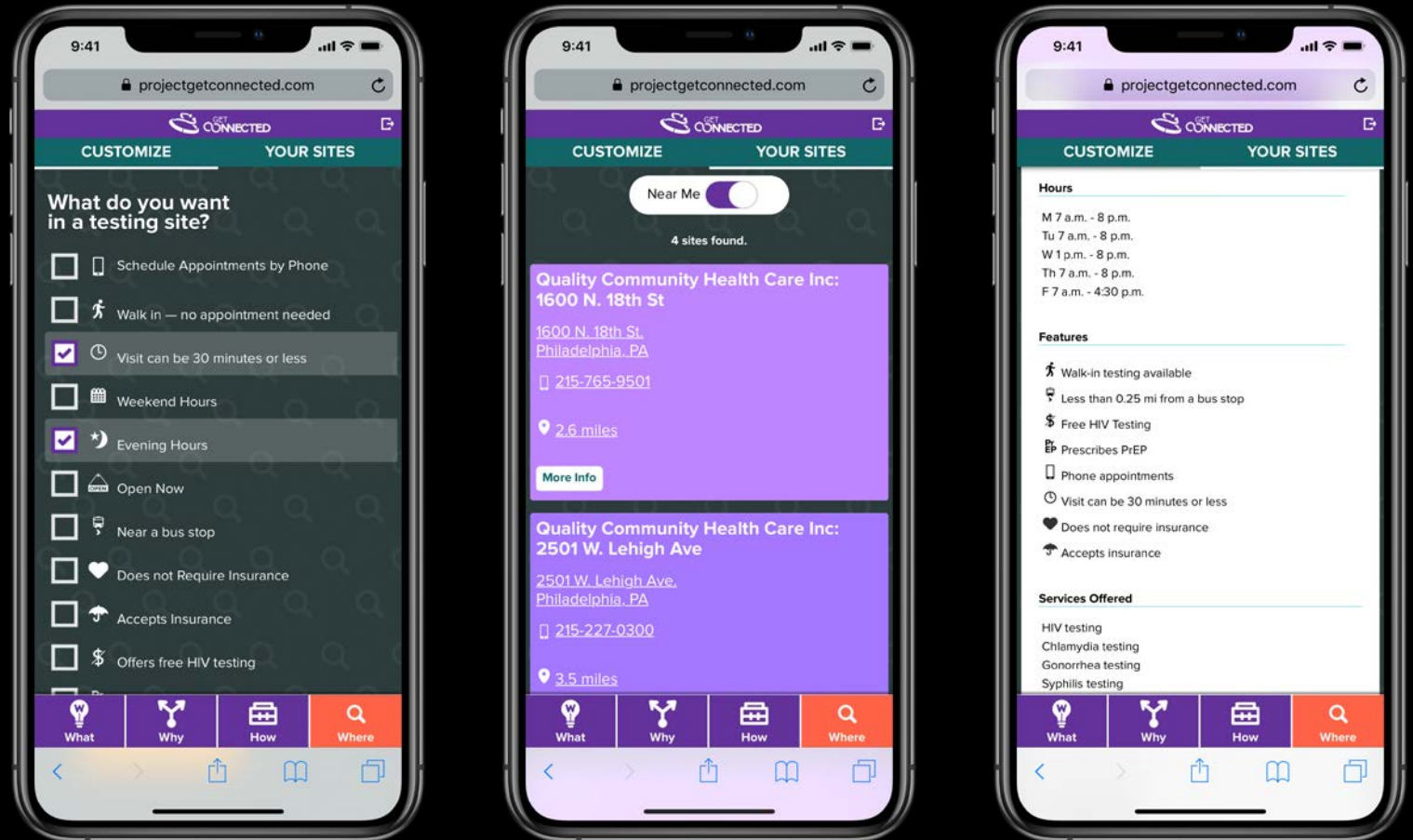


Google



Test Locator

- “Matches” users with the highest ranked sites in their area using an algorithm from mystery shopping and RCT data, and any filters a participant selects
- Help agencies identify how to improve their service delivery for YMSM



User-Experience Rank System

Raters' Scores

- Site is Youth Friendliness
- Site is LGBTQ Friendly
- Provider is LGBTQ friendly
- Provider is Sex Positive
- Opportunities for goal setting
- Acknowledgement of Diversity

Ideal/Best Practices

- Confidentiality Maintained
- Assessment for IPV during visit
- Exploration for testing motivations

Mystery Shoppers

A Youth-Driven Community Assessment Approach

- Participant observation approach that synergizes the Standardized Patient Method (SPM) used for medical training and Mystery Shopping strategies used in marketing.
- Youth serve as consumers and researchers by evaluating services to recommended guidelines, and offer QI/QC recommendations based on experience.
- Mystery shopper has been employed to evaluate contraceptive services among young people, community pharmacy consultations, psychiatric services, and alcohol sales to minors.

Mystery Shoppers

Clinic Characteristics

Session speed

LGBT visibility

Medical forms

Clinic environment

Privacy & confidentiality

PrEP specific indicators

Provider Exchanges

Relationship context

Counseling session

Safer sex education

Perceived provider competency

Negative provider interactions

Testing Experiences

The provider offered me risk reduction options.



The provider offered to help me set action steps to meet new safer sex goals.



The provider made sure I knew how to use a condom.



The provider helped me identify a lube that works for me.



Initially, the nurse practitioner appeared friendly and well -meaning. She told me about the different options and testing procedures that were available to me. ...When I refused to do the penile swab she replied: “Our clients do not have the option to pick and choose which test they can or can’t do. It is all or none here; if you do not do the penile swab then I cannot offer you any other tests.”



... When I still refused, she replied that this was a simple painless procedure and that it would take a few seconds. She seemed almost disappointed that she had not intimidated me into doing the penile swab. Then she did HIV rapid test and did not explain anonymity or confidentiality. She asked me to wait outside, and did not do any more counseling for me.



... She seemed really disappointed that my results were not what she expected. She said, “With you history, I was certain you would be positive. But you seem to be negative. I am going to give you some condoms. Use them every time for sex.”



... Overall, this was the worst testing site, where my autonomy were taken away and I was denied services because I refused to toe the line. This is a site that should be avoided for its unethical approaches and for being unapproachable to clients. This is definitely a site that should be avoided in its entirety.



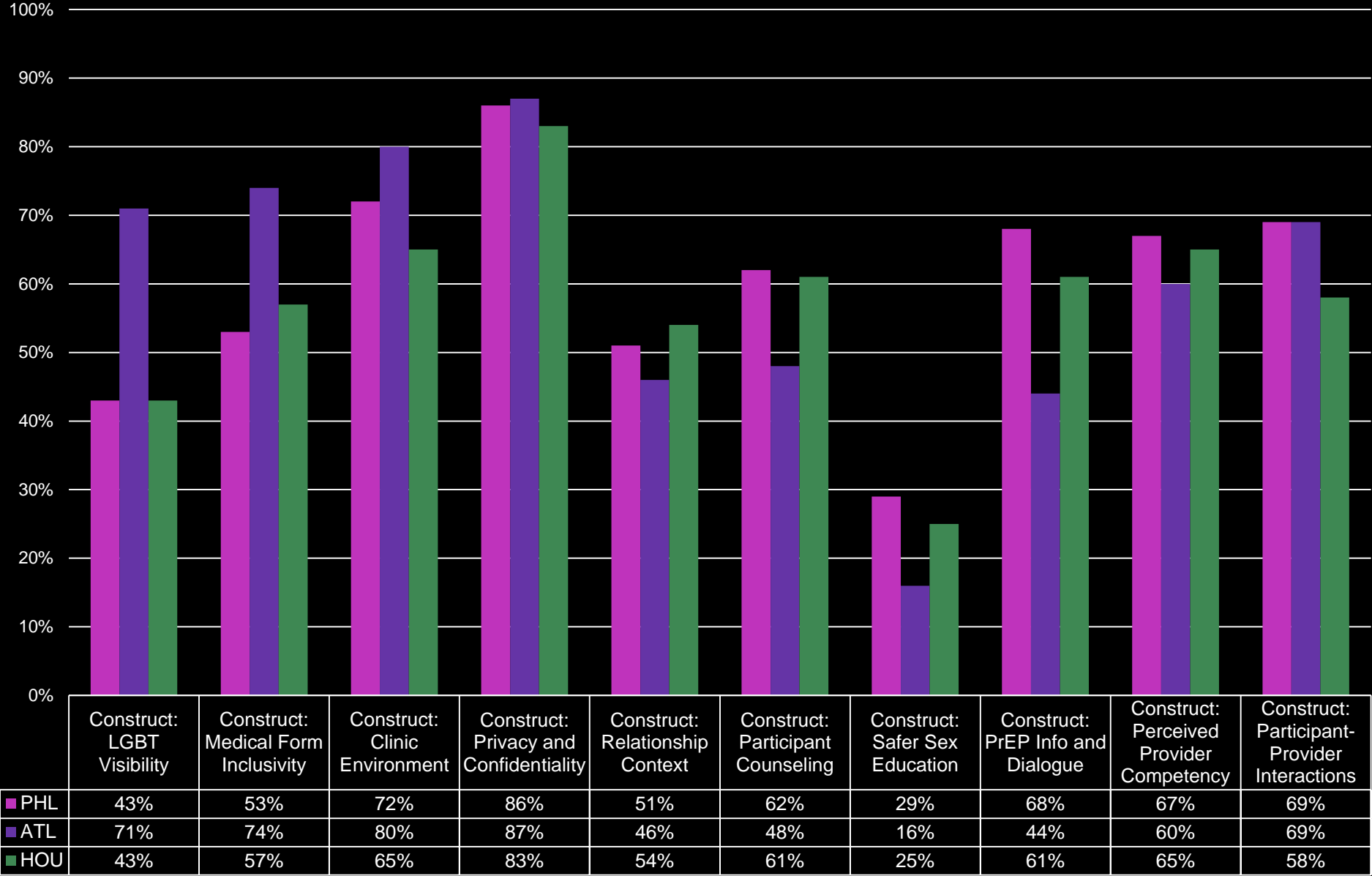


Testing Sites' and Mystery Shopper Participants' Characteristics

	Philadelphia	Atlanta	Houston
Mystery Shoppers	N=9	N=6	N=9
Age Range	19-24	21-24	19-24
Site Characteristics			
Sites identified	N=53	N=50	N=46
Free HIV Testing	53 (100%)	50 (100%)	46 (100%)
Walk-in appointment	38 (71.7%)	19 (38.0%)	19 (41.3%)
Rapid HIV test	30 (56.6%)	17 (34.0%)	19 (41.3%)
Sites visited	38 (71.7%)	19 (38.0%)	19 (41.3%)
Sites deemed accessible* to youth	30 (56.6%)	17 (34.0%)	19 (41.3%)

Bauermeister, J.A., Golinkoff J.M., Lin, W.Y., Claude, K.F., Horvath, D., Cowshen, N., Schlupp, A., Vickroy, W., Desir, K., Lopez, A.V., Castillo, M., Manney, M., Wimply, T.A., Leung, K., Sullivan, P.S., Santiago, D., Hernandez, R., Paul, M., Hightower, L., Weidman, L., Lee, S., & Stephenson, R. (in press). Testing the Testers: Are young men who have sex with men receiving adequate HIV testing and counseling services? *AIDS*

Average Site Scores across MS Domains



SO THAT'S OUR KILLER APP.
WHAT'S YOURS?

A TALENTED
WORKFORCE.

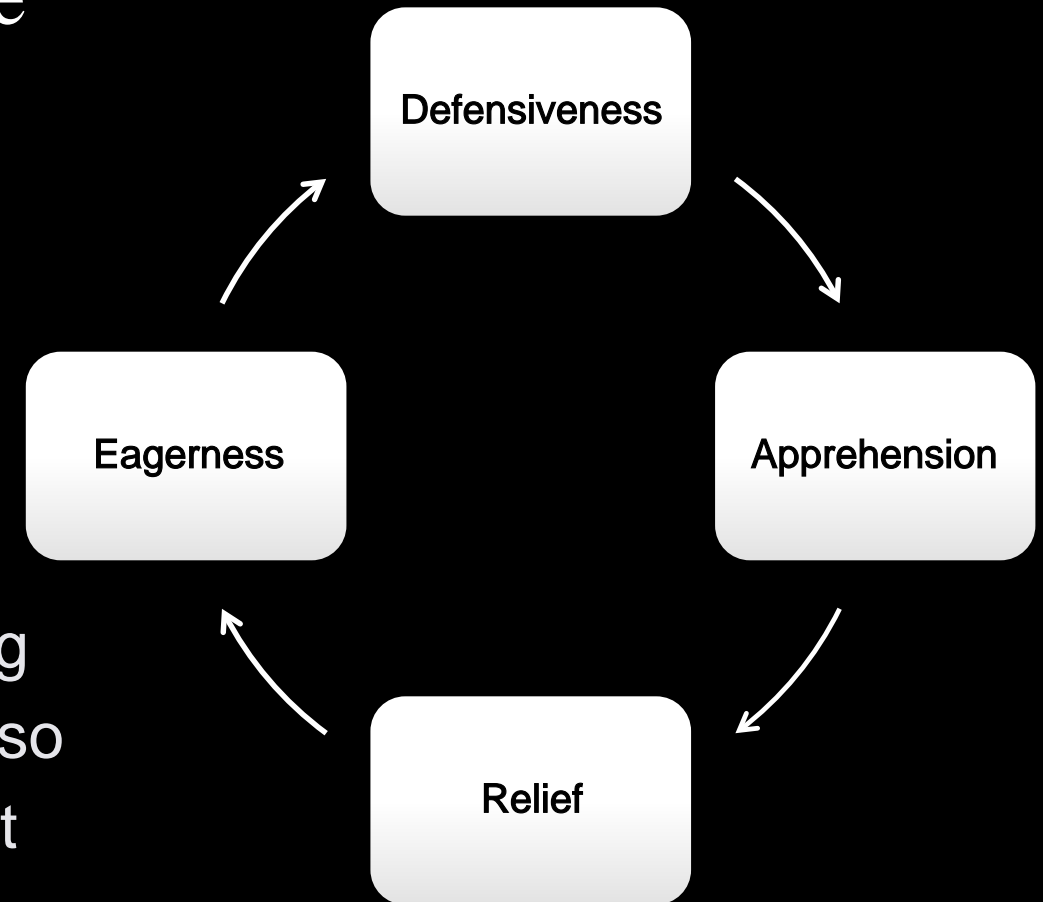


**Beyond individual level change efforts,
mHealth can (and should) leverage
advances in public health informatics to
support ongoing quality assurance practices
and provide opportunities for system level
change across the cascade.**

What About the Agencies?

Agency barriers to cultural competence

- Each agency receives their report in the mail
- Key barriers
 - Agency decisionmaking structures
 - Inappropriate materials
 - Space for confidential testing & counseling
 - Lack of quality control or incentives to do so
 - Perception of existing training as sufficient
 - Diverse/divergent counseling approaches



Participant Ratings of Planned Parenthood Mid and South Michigan Warren Health Center

June 2016 – December 2016

Over the past six months, we reported 24 visits to Planned Parenthood Mid and South Michigan Warren Health Center by participants in the Get Connected research study. Below is a summary of participants' ratings of your site based on your site's characteristics and participant-provider exchanges.

At the conclusion of this report you will find qualitative feedback from participants about their experiences at your testing site and a summary of your site's ratings.



255
minutes

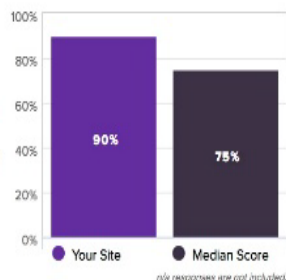
Clinic Characteristics

Average participant time at Planned Parenthood Mid and South Michigan Warren Health Center

90

LGBT Visibility

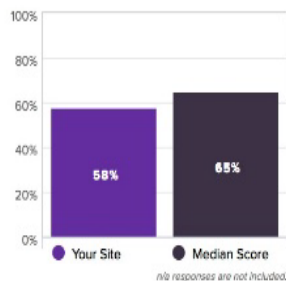
Your site's median LGBT Visibility score was **above** that of other testing sites in Atlanta. LGBT Visibility was measured by considering whether there was signage (e.g. rainbow flag, equal sign sticker) and printed materials aimed at LGBT people (e.g. brochures) at the testing site.



58

Medical Form Inclusivity

Your site's median Medical Form Inclusivity score was **below** that of other testing sites in Atlanta. Medical Form Inclusivity was measured by considering whether your medical forms used LGB-inclusive language and transgender-inclusive language.

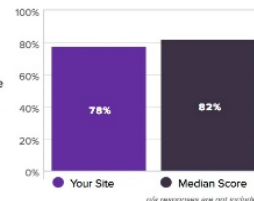


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78

Clinic Environment

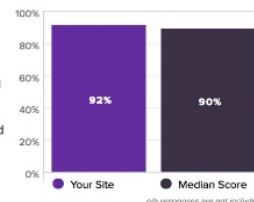
Your site's median Clinical Environment score was **similar** to that of other testing sites in Atlanta. Clinical Environment score was measured by considering perceived friendliness and judgement of clinic staff, perceived LGBTQ sensitivity of clinic staff, clinic staff's usage of LGB-affirming language when speaking with patient, and comfort of the clinic waiting room.



92

Privacy and Confidentiality

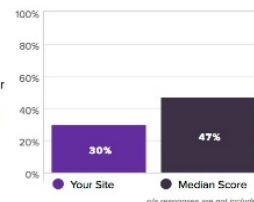
Your site's median Privacy and Confidentiality score was **similar** to that of other testing sites in Atlanta. The Privacy and Confidentiality score was measured by considering whether clinic staff and the provider kept patient information confidential, if privacy was maintained in the waiting room, and if confidentiality was explained (either verbally or via a document) prior to testing.



30

PrEP Information and Dialogue

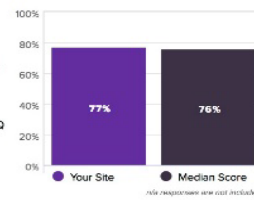
Your site's median PrEP-specific Indicator score was **below** that of other testing sites in Atlanta. The PrEP-specific Indicator score was measured by considering whether the clinic had information about PrEP, if clinic staff shared information about PrEP or discussed PrEP as a prevention strategy with participants.



77

Perceived Provider Competency

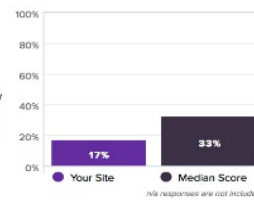
Your site's median Perceived Provider Competency score was **similar** to that of other testing sites in Atlanta. The Perceived Provider Competency score was measured by considering how participants perceived the HIV/STI knowledge of the provider and how informed the provider seemed about LGBTQ health issues.



17

Participant-Provider Interactions

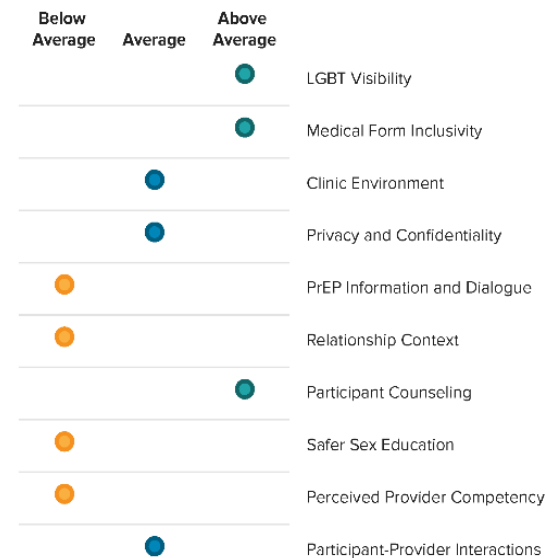
Your site's median Patient-Provider Interactions score was **below** that of other testing sites in Atlanta. The Patient-Provider Interactions score was measured by considering how comfortable the provider made participants feel if participants felt pressured by the provider to adopt specific risk reduction options, if participants thought the provider was judgmental about the kind of sex they have (e.g. anal, receptive, penetrative) and if participants felt the provider was judgmental about the number of partners they had and how they met their partners.



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Summary of Site Ratings

Your Site's rating in all categories, as compared to all sites in [Atlanta]



Integrating Systems-Level Interventions with mHealth

- Optimal success across the prevention and care continuum may prove challenging due to individual, structural, and societal barriers.
- To "make prevention work", we must maximize the potential of systems-level interventions to address gaps in the cascade, and ensure that engagement bridges digital and real world needs and resources.
- Gaps remain the availability and evaluation of systems-level interventions along the Prevention and Care Continuum.



Conclusions

- Integration of online and offline best practices are needed to advance gaps in HIV/STI prevention and care continuum.
- Optimal Service Delivery:
 - Respect the patient
 - Protect or enrich client autonomy
 - Ensure safety, privacy, and confidentiality
- System-level interventions are needed for providers to:
 - Evaluate performance based on organizational best practices & guidelines
 - Offer services that are organized around client needs
 - Build and strengthen resources within/across systems
- On-going quality assurance & improvement (QA/QI) practices may provide opportunities for implementation science strategies and system-level change across the HIV/STI Prevention and Care cascade.

Acknowledgments



Lisa Hightow-Weidman



Rob Stephenson



Keith Horvath



Jesse Golinkoff



Willey Lin



Kristina Felder Claude



Questions?